

# Gilchrist Summer Camp 2022

CAMPER'S NAME: \_\_\_\_\_

AGE: \_\_\_\_\_ DOB: \_\_\_\_\_ GRADE ENTERING: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

PARENT NAME: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

WORK #: \_\_\_\_\_ CELL #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PARENT NAME: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

WORK #: \_\_\_\_\_ CELL #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

WEEK

1

WEEK

2

WEEK

3

WEEK

4

WEEK

5

WEEK

6

WEEK

7

May 31-June 3    June 6-10    June 13-17    June 20-24    June 27-July 1    July 11-15    July 18-July 22

1. In the event of poor weather, my child may attend a field trip to the movie theater to see a children's G or PG rated movie in place of an already scheduled outdoor trip. **Y/N**
2. I understand that all field trips provided during summer camp are taken on a Leon County School bus or another bus company provider. My child has permission to ride. **Y/N**
3. I understand summer camp is open to **Rising K — Rising 6th** grade students and my child may be interacting and participating in activities with campers of all ages. **Y/N**
4. I understand that Gilchrist EDEP often uses photos of the children who attend summer camp programs for displays, articles and promotions. It is my decision that Gilchrist MAY USE my child's photograph during summer camp activities that relate to the program. **Y/N**
5. My child has permission to play games on an iPad while being supervised. **Y/N**
6. My child has the following allergies or special needs:  
\_\_\_\_\_

7. Please circle a T-Shirt size:    YOUTH S    YOUTH M    YOUTH L    YOUTH XL    ADULT S    ADULT M    ADULT L

## Authorized Alternate Pick-Ups and Emergency Contacts

Please write legal name as it appears on their Driver's License

1. \_\_\_\_\_ Phone #: \_\_\_\_\_ Relationship: \_\_\_\_\_

2. \_\_\_\_\_ Phone #: \_\_\_\_\_ Relationship: \_\_\_\_\_

3. \_\_\_\_\_ Phone #: \_\_\_\_\_ Relationship: \_\_\_\_\_

# Policy Statement

1. **Eligibility and Enrollment:** Summer camp participants must be school age and meet the basic entry-level criteria in the area of self-care, communication, mobility and social-emotional development. All participants must complete the summer camp registration form prior to participation. Students who are enrolled in a non-Leon county school may participate in the EDEP summer program with consent from the school Principal and EDEP Manager. A current copy of the child's immunization records will be required at the time of registration.
2. The nonrefundable registration fee and the first week of camp fee must be paid at the time of registration to guarantee a slot. Payments can be made through the online portal (incoming Kindergarten students and non-Gilchrist students are unable to utilize online payment methods) or in person via check or money order. **WE DO NOT ACCEPT CASH PAYMENTS.** If payments are made online, I will print out and provide a receipt of payment.
3. The registration fee is non-refundable. I can make schedule changes up until **May 11, 2022.** If I change weeks after May 11th, I may be charged an additional registration fee.
4. I will be responsible for the weekly camp fee on **Monday morning** of each week. My child may not attend until the payment has been received. A \$10.00 late fee per family will be assessed for any late payments.
5. **Refunds:** No refunds are permitted, except for documented cases of prolonged illness (two weeks or more with a doctor's note) or family relocation. Absolutely no refunds will be given on registration fees. Refunds must be requested in writing.
6. **Return Checks:** Returned checks are processed through the LCSB District Office. If your check is returned unpaid, the finance department will attempt to redeposit a second time. In the event your check is returned again, the district office will send it to the school's EDEP Manager for collection. You will be notified and a return check fee of \$20.00 will be assessed and services will be suspended until payment is made. If two checks are returned unpaid in a single school year, parents will be required to pay by money order for the remainder of the year.
7. **Arrival and Departure:** Each child **MUST** be signed in and out by a parent or guardian, or another adult authorized in writing by the custodial parent. Parents who have legal documentation limiting the rights of one parent's access to the child must provide these documents to the EDEP program. Parent access to a child will not be denied without a copy of a court order.
8. Parents who are late picking-up their students from camp are assessed a late fee of \$1.00 per minute after 6:00PM. Payments are due at the time of pick-up. **Pick-Up time is determined by school clocks.**
9. **Discipline:** To achieve the goal of providing quality enrichment activities for children in an environment of cooperation and respect, positive discipline practices are utilized by all members of the EDEP staff. These policies and practices are consistent with and conform to the school's discipline policy. If a student chooses not to, or cannot, demonstrate appropriate behavior within the program, the behavior will be interpreted to mean that the student does not have the faculty or desire to participate in the program. At such time, the student will leave the program at the request of the Program Manager. Should it be deemed that the participant is capable, but chooses not to behave in an appropriate manner, no refund will be given.
10. **Illness/Medication:** Should a child become ill while at summer camp, **parents must pick up the child from the program immediately.** Whenever a child is to be given prescription or over-the-counter medicine during camp, the parents must provide a *Medication Authorization Form*. All medication must be provided in the original container, labeled with the student's name, name of medication, and the time and dosage to be given.
11. **Insurance:** Leon County Schools EDEP does not carry accident insurance on its participants. It is the parent's responsibility to carry adequate insurance. Such a policy is available through Leon County Schools. Check with the school's secretary for an application.
12. **The camp is not responsible for lost or stolen items.** We will make every effort to help students keep up with their belongings. Please do not send your student with valuables or electronic devices. **Cellphones may not be used at camp.**

**I HAVE READ THE POLICY STATEMENT AND AGREE TO ALL OF THE POLICIES LISTED FOR THE  
SUMMER CAMP PROGRAM.**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**PARENT SIGNATURE**

Both parties responsible for the fees and attendance of the child must sign the form. One signature only indicates the person who signed is fully responsible, regardless of the second parent/guardian status.

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**PARENT SIGNATURE**